# Rules of
Department of Mental Health
Division 40–Licensing Rules
Chapter 9–Rules for Day Programs Serving People Who Are Mentally Retarded and Developmentally Disabled

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Title 9—DEPARTMENT OF MENTAL HEALTH
Division 40—Licensing Rules
Chapter 9—Rules for Day Programs Serving People Who Are Mentally Retarded and Developmentally Disabled

9 CSR 40-9.015 Physical Plant Requirements

PURPOSE: This rule prescribes physical plant requirements in day programs as required by section 630.710, RSMo.

Editor's Note: The following material is incorporated into this rule by reference:


In accordance with section 536.031(4), RSMo, the full text of material incorporated by reference will be made available to any interested person at the Office of the Secretary of State and the headquarters of the adopting state agency.

(1) The head of the program shall provide premises which are safe and suitable for the operation of a day program.

(A) All windows, doors and vents used for ventilation or temperature control shall be properly maintained to repel rodents and insects by screens or controlled air currents.

(B) Clear glass doors and large windows shall be marked plainly at varying heights to avoid impact.

(C) Heating appliances such as wood stoves, fireplaces, space heaters, radiators and wall furnaces in spaces occupied by clients shall be protected by partitions, screens or other means approved by the department to safeguard clients from burns.

(D) Walls, ceilings and floors shall be finished so as to be easily cleaned. They shall be free from splinters, cracks and chipping paint. Floor covering shall be in good condition. Lead-free paint shall be used for all painted surfaces. The physical plant shall be structurally sound and attractive inside and outside.

(E) All flammable liquids, poisonous materials, medicines or other items potentially hazardous to clients shall be stored and locked so as to be inaccessible to the client. The use of these items shall be governed by the individualized program plan and supervised by program staff.

(F) The program premises shall be clean and free from dirt and evidence of vermin (for example, bugs, insects or rodents).

(G) Each program shall have a telephone in working order. Emergency numbers (including that of the local fire department, police department, ambulance, physician, hospital and placement office) shall be posted by the telephone. The phone shall be available to staff.

(H) The program premises shall be dry, heated and well-ventilated. Temperature of the rooms shall be no less than sixty-eight degrees Fahrenheit (68°F) and no greater than eighty-five degrees Fahrenheit (85°F).

(I) The day program shall provide adequate fencing around swimming pools, ponds, sewage lagoons, liquefied petroleum (LP) gas tanks and other potentially hazardous areas.

(2) The head of the program shall assure that indoor space meets the following requirements:

(A) The program premises shall have at least forty (40) square feet of usable floor space for each client in the licensed capacity;

(B) Floor space shall be measured wall-to-wall from the inside walls of areas used for clients' activities;

(C) Floor space shall not include kitchens, hallways, bathrooms, closets, staff lounge, office space or floor space occupied by furniture or shelving not used by the clients unless that area is also used in training, the need for which is documented by the clients' individualized program plans;

(D) The program premises shall have storage space for materials used by clients;

(E) Space shall be provided for office equipment, the making and keeping of records and for transaction of business. This space shall not interfere with the clients' program area; and

(F) The day program shall have a ceiling height of at least seven feet ten inches (7'10") in all rooms used by clients except for bathrooms and hallways which shall have a ceiling height of at least seven feet six inches (7'6"). This subsection does not apply to any day program which was deemed licensed by the department on April 1, 1986, unless the program changes ownership or increases its licensed capacity.

(3) The head of the day program shall assure that restroom facilities meet the following requirements:

(A) Toilet and handwashing facilities shall be in working order and convenient for the clients' use;

(B) Single-serving towels or electrical hand-drying devices, soap, hot and cold running water and toilet paper shall be provided and easily accessible for the clients; and

(C) Restrooms shall be clean, well-lighted and heated;

(D) There shall be at least one (1) flush toilet and one (1) handwashing sink for each fifteen (15) clients or any additional fraction.

(E) Urinals are not counted in determining the one to fifteen (1:15) ratio;

(F) Where toilet facilities are provided to serve members of both sexes and are designed for use by more than one (1) person at a time, separate restrooms shall be installed for each sex;

(G) Each program shall have doors, curtains or partitions to provide privacy;

(H) Day programs serving clients who have physical disabilities shall equip toilets and restroom fixtures for their use;

(I) Restrooms shall be odor free and ventilated by means of operable windows or appropriate motorized exhaust systems; and

(J) If the program serves incontinent clients, there shall be a designated area for changing clients, which provides mats, doors or privacy curtains, impermeable surface or disposable service, sanitizing or germicide wipe space, soap and an accessible water supply separated from drinking, dishwashing or food service areas.

(4) Day programs with clients who are physically disabled shall—

(A) Be barrier-free;

(B) Have grab bars, ramps and railings which are designed in compliance with the 1980 Standards of the American National Standards Institute, Inc. (ANSI), and which are maintained to function properly; and

(C) Have means of egress which are large enough to accommodate wheelchairs and other mobility devices used in exiting, if persons in these devices are clients; the means of egress shall be a minimum of two feet eight inches (2'8") wide.

(5) The day program shall control the temperature of hot water at all taps accessible to clients by the use of thermostatic mixing valves, or by other means, to keep the temperature from exceeding one hundred fifteen degrees Fahrenheit (115°F). If clients are capable of using hot water or are in a training program for the use of hot water, the temperature of tap water shall not exceed one hundred twenty-five degrees Fahrenheit (125°F).

(6) Cool, safe drinking water approved by the appropriate state or local public health authority shall be available to clients at all times. Even if drinking fountains are provided, the day program shall provide single-service cups or glasses for those unable to drink from the fountain.
9 CSR 40-9.035 General Medical and Health Care

PURPOSE: This rule prescribes general medical and health care requirements for day programs as required by section 630.710, RSMo.

(1) The head of the program shall require each client’s record to contain an annual statement from a physician indicating that the client is free of symptoms and signs of communicable diseases and is capable of participating in the activities offered by the program. The record shall contain results of the client’s annual tuberculin control test. Any medical conditions that would restrict a client’s activity, such as high blood pressure, diabetes, and the like shall be noted.

(2) The head of the day program shall immediately report any unusual occurrences of infectious or contagious diseases, epidemic outbreaks, poisoning or other occurrences which threaten the welfare, safety or health of any client, to the licensing office, local health authorities and the client’s family or community residential facility, regional center and placement office, if applicable. The program shall furnish other information relative to the occurrences as required by the department.

(3) The program shall have a written policy regarding whether or not it will administer drugs and medications.

(4) If medications are administered at the day program, the head of the program shall manage client’s medications in one (1) or a combination of the following ways and shall thoroughly describe the process in a policy and procedure:

(A) All prescription drugs administered at the day program shall be under the custody and control of the head of the program.

(B) If clients do not self-administer, the medication must be transported in a hand-carried box which is key-locked in the client’s residence and is not unlocked until it reaches the day program.

(C) If the transporter is someone other than a staff person from the client’s residence or the parent/guardian, s/he will not have a key to the locked box.

(D) If the natural parent or guardian transports only his/her child/ward to the day program, the locked box is not required.

(E) A unit-dose system may be used, in which the medication has been dispensed in blister cards by a pharmacist so that the blister card, or, if a single dose is sent daily, each dose of the medication is labeled with the client’s name, the medication dose and schedule of administration. Unit-dose medication shall be transported to the day program as set out previously in paragraph (4)(B)2.

(5) The head of the program shall regulate the administration of the medication by day program staff in the following ways:

(A) All prescription drugs administered at the day program shall be in containers or blister cards dispensed by the pharmacist; medications shall be labeled with the client’s name, instructions and physician’s name as required by law. A dated copy of the physician’s orders for medication shall be kept at the day program.

(B) The date and time(s) of administration, the name of the person giving the medication and the quantity of any medication given shall be recorded in the client’s permanent record.

(C) All medicine shall be kept in a locked container.

(D) Medication needing refrigeration shall be kept in the refrigerator in a locked container separate from food.

(E) Discontinued, outdated or deteriorated drugs shall immediately be disposed of by
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1. Physician's orders shall be limited to ninety (90) days for prescription drugs. Pro re nata (PRN) orders for prescription drugs shall be reviewed every thirty (30) days.

2. Standing orders for the entire facility shall not be allowed.

3. PRN orders for nonprescription drugs and treatment may be utilized for individual residents if the order indicates specific drugs and specific drug dosage or specific treatments, for specific indications.

4. Only in an emergency, the physician may give or change an order by telephone but the order must be signed within forty-eight (48) hours.

5. Stock supplies of nonprescription medications are permitted. Nonprescription medication shall not be used after the expiration date on the medication container and shall be disposed of properly; and

(I) The following paragraphs shall regulate the storage and administration of drugs and medications:

1. Medications shall be properly and clearly labeled in accordance with Missouri statutes and shall be stored under lock and key. Schedule II controlled substances as defined under section 195.017, RSMo shall be stored under double lock. Internal and external medications shall be kept separate;

2. The head of the program shall assume responsibility for the proper administration of medications in a well-lighted area;

3. Errors in administering or in self-administration of medication shall be reported immediately to the client’s residence, physician and regional center case manager;

4. Medical treatment and medications shall be administered in accordance with the physician’s orders and directions on the label of medication containers; and

5. First-aid supplies needed to treat simple medical emergencies shall be available at the facility.

(6) The head of the day program may permit a client’s natural or adoptive parent to administer medication to his/her own child while at the day program if the head of the day program is aware of the type and dosage of medication being administered.

(7) If a program takes possession of the medications of self-administering clients, the program shall meet all rules for programs which administer medications.

(8) If a program has both clients who self-administer medications and clients who do not self-administer, the program must take safeguards to ensure that clients who cannot self-administer are protected.

(9) Errors in dispensing or in self-administration of medications shall be reported immediately to the appropriate physician, the head of the program and the individuals who are to be notified in case of emergency as identified in the client’s record.

(10) Information regarding any illness, accident or injury and action taken which occurs while the client is attending the day program shall be noted in the client’s record.

(11) The day program shall maintain first-aid supplies sufficient to care for minor injuries.


9 CSR 40-9.055 Food Services

PURPOSE: This rule prescribes food service in day programs as required by section 630.710, RSMo.

Editor’s Note: The secretary of state has determined that the publication of this rule in its entirety would be unduly cumbersome or expensive. The entire text of the material referenced has been filed with the secretary of state. This material may be found at the Office of the Secretary of State or at the headquarters of the agency and is available to any interested person at a cost established by state law.

(1) The day program’s kitchen shall meet the food service needs of its clients to include having a sufficient supply of equipment to prepare meals satisfactorily and a sufficient number of dishes, glassware and flatware.

(2) The day program shall maintain its food-contact surfaces, utensils and equipment used for eating and drinking in good condition, free from chips and cracks and thoroughly cleaned and sanitized after each use. If food-contact surfaces, disposable eating utensils and equipment are used, they shall be stored in a manner that will maintain cleanliness until used and disposed of after use in a sanitary manner.

(3) If clients bring sack lunches to the program or if the program prepares food or has food catered, the program shall meet the following requirements:

(A) The program shall have equipment used in the preparation and serving of food including can openers, meat slicers and cutting boards, cleaned thoroughly at least once a day, if used;

(B) The program shall provide dining areas equipped with tables, chairs, eating utensils and dishes which are appropriate to clients’ developmental needs and are in sufficient quantity to serve the number of clients for which the day program is licensed;

(C) The day program shall have a dishwasher for the washing of utensils and dishes. The dishwashing machine shall have an adequate supply of wash and rinse water at one hundred forty degrees Fahrenheit (140°F) at a minimum;

(D) A three (3)-compartment sanitizing system may be used in lieu of a dishwasher if the compartments are of sufficient depth and size to accommodate those utensils most frequently used in the preparation and serving of food;

(E) In lieu of hot water, chemicals approved by the department may be used for sanitizing purposes;

(F) Food and drink prepared at or catered to the day program shall be free from spoilage and prepared safe for human consumption. Meat must have been inspected by a government inspection source;

(G) The program shall store dry products and canned goods at least four inches (4") off the floor and rotate the stock;

(H) The program shall have a refrigerator that is sufficient to meet the needs of the...
include poisons, toxins, inflammables, infectious.

The program shall store and use only those hazardous materials required to maintain sanitary conditions. Hazardous materials include poisons, toxins, inflammables, infectious items, corrosives and all sharp objects.

These materials shall be properly labeled and stored so as not to contaminate food or constitute a hazard to program clients or staff. The program shall not use hazardous materials in food service areas unless materials safe to humans cannot be substituted.


### 9 CSR 40-9.075 Adequate Staff

**PURPOSE:** This rule prescribes requirements for personnel employed in a day program as required by section 630.710, RSMo.

1. Each day program shall have a chief administrative officer referred to as the head of the day program in these rules.

2. The head of the day program shall report any change in location, ownership, management or administration to the department within five (5) days.

3. All personnel, including physical therapists, occupational therapists and volunteers, who have frequent (regularly scheduled at least once per week) and direct contact with clients, shall have a tuberculosis skin test or chest X-ray and a statement from their physician stating they have been screened for contagious diseases, at the time of employment and annually after that. The physician's statement shall indicate the specific communicable diseases for which the person has been tested.

4. Any employee or volunteer diagnosed or suspected of having a contagious or infectious disease shall not work or be in the day program until the time a written statement is obtained from a physician that the disease is no longer contagious or is found to be noninfectious.

5. The program shall give each employee a written job description.

6. The program shall keep job descriptions for all positions on file.

7. Each day program shall have, as a minimum, a daily direct care staff-to-client ratio as follows, unless program needs or client mix require otherwise:

   A. Level 1. A staff-to-client ratio of one to twelve (1:12) for clients who have advanced daily living skills and are independent in self-care, who participate in many activities and whose problems do not get out of hand;

   B. Level 2. A staff-to-client ratio of one to eight (1:8) for clients who have some advanced daily living skills but may require minimal supervision in self-care skills, who may have a physical handicap requiring some physical assistance and who may have intermittent socially inappropriate behaviors which require some intervention;

   C. Level 3. A staff-to-client ratio of one to six (1:6) for clients who require some verbal or physical assistance in self-care skills or who have intermittent serious behavior problems (assaultive or self-abusive);

   D. Level 4. A staff-to-client ratio of one to four (1:4) for clients who require nearly total physical care, frequent intervention, or both, due to serious behaviors (assaultive or self-abusive). All clients under age six (6) are considered level 4; and

   E. Level 5. A staff-to-client ratio of one to one (1:1) for clients who require individualized intervention due to serious behaviors (assaultive or self-injurious), in-home service setting or other unique circumstance noted in the individual habilitation plan. Services at level 5 are developmental or habilitative in nature and do not substantially duplicate parent/infant intervention or other services outlined in this section under levels 1, 2, 3 and 4.

8. The head of the program shall designate a person capable to act for him/her when unavailable.

9. The program shall have sufficient backup staff to provide services to clients and to meet licensing staffing requirements at all times.

10. No clients shall be present at the day program unless at least one (1) staff person is also present.

11. The day program shall provide for orientation and training as follows:

   A. New employees and volunteers shall receive orientation to acquaint them with the philosophy, organization, program, practices and goals of the program;

   B. Each employee shall receive a minimum of six (6) hours of training annually. The training shall include the use of physical restraint and training in cardiopulmonary...
resuscitation (CPR) and first-aid. The training and periodic reviews, shall be in accordance with the guidelines of the American Red Cross, the American Heart Association, the National Safety Council, or other nationally recognized training organization. Training review must be consistent with the guidelines of the certifying authority. At least one (1) staff person with these skills will be on duty at all times and in close proximity to the clients. Based on the configuration of the building and the number of clients, more than one (1) trained staff may be required in the program; and

(C) The day program shall provide documentation of this training.

(12) All day program staff shall be knowledgeable about the program’s policies and procedures.

(13) The day program staff, or other personnel, shall not be under the influence of alcohol or illegal drugs while on the premises. The day program staff, or other personnel, shall not be in a state of impaired ability because of medication use.

(14) All staff and volunteers responsible for direct care of clients shall be eighteen (18) years of age or older. Volunteers as young as sixteen (16) years of age may assist staff but shall work under staff supervision and shall not be responsible for direct care.

(15) All staff administering medications shall have successfully completed a course on medication administration. This training shall be updated every two (2) years. The initial training and biennial update shall—

(A) Be approved by the regional center;
(B) Be offered by an instructor who is a licensed practical nurse (LPN) certified by the Division of Aging as an instructor, a registered nurse (RN), a pharmacist or a physician;
(C) Not apply to LPNs, RNs or certified medication technicians with lifetime certification; and
(D) Be documented in the recipient’s personnel file.

(16) The course to update training in medication administration shall address at least the following:

(A) Review of Basics.
1. Medication ordering and storage.
2. Medication administration.
   A. Use of generic drugs.
   B. How to pour, chart, administer and document.
   C. Information and techniques specific to the following: inhalers, eye drops, topical medications, insulin injections and suppositories.
   D. Infection control.
3. Individual rights and refusal of medications and treatment;
   (B) Issues specific to the facility/program as indicated by the needs of the clients, and the medications and treatments currently being administered.
   1. Emergency response.
   3. Corrective actions based on problems identified by the staff, the trainees or issues identified by regulatory and accrediting bodies, professional consultants or by any other authoritative source; and
   (C) Updates on new medications or new procedures.


9 CSR 40-9.095 Recordkeeping

PURPOSE: This rule prescribes requirements for a uniform system of recordkeeping in day programs as required by section 630.710, RSMo.

(1) Records shall be kept on all clients admitted to any day program and shall be retained for a minimum of five (5) years following discharge of the client.

(2) All active records shall be current and readily available for review by the department or other authorized persons.

(3) Records shall be stored in such a manner as to properly safeguard the confidentiality of their contents.

(4) Individual client records shall be kept at the day program location and include the following:

(A) Admission forms containing client’s name, place of residence, home telephone number, Social Security number, date of birth, place of birth, sex, race, height, weight, color of hair, color of eyes, identifying marks, religion, marital status, a photograph sufficiently recent to be used for identification, language spoken or used in natural home if not English; name, address, and telephone number of parents, guardians, next of kin, or other responsible party; date of admission, diagnosis and age at onset of disability, type and legal status of admission to the program; and the name, address and telephone number of personal physician. If a client refuses to provide a photograph, this shall be documented in the record;
   (B) Current comprehensive evaluation reports;
   (C) Special diets, and for the children, immunization records;
   (D) The individualized program plan;
   (E) The client’s drug chart if medications are administered at the day program; and
   (F) Reports of any sudden change in condition, injury, accident or deviation from routine delivery of services shall be entered at the time of occurrence.

(5) Entries in the client’s record shall be signed and dated by the person making the entry.

(6) The program shall make available for public inspection to staff, clients, their families or legal representative and the public, a complete copy of each official notification from the department of violations, deficiencies, licensing approvals, disapprovals and responses, a description of services and charges for services.

(7) Each day program shall maintain a personnel file for each employee containing Social Security number, home address, phone number, reference information, educational background, work experience with dates of employment, reasons for leaving, record of attendance at orientation training courses, periodic job performance evaluations, copies of applicable licenses and renewals, and for qualified mental retardation professionals, documentation of education and experience. Reports of tissue tests or chest X-rays and statements that the employee is free from communicable diseases also shall be kept on each employee. Individual personnel records shall be made available for licensing inspections at the day program at the time of inspection.

(8) The day program shall furnish to the department those reports as may be requested. Proper safeguards to protect the rights of residents and employees shall be maintained.

(9) Every day program shall keep a current table of organization on file.
(10) Each day program shall keep a record of the names and number of hours worked by employees.

(11) Each day program shall maintain in the day program file a record of epidemic outbreaks.

(12) The day program shall maintain and make available to the department such other records that the department may require.


9 CSR 40-9.115 Admission Criteria

PURPOSE: This rule prescribes criteria for the admission to day programs as required by section 630.710, RSMo.

(1) Each client shall have an individualized program plan prior to admission into the program or within thirty (30) days of admission. Programs designated as latch-key programs as defined in 9 CSR 40-1.015(2)(T) will be required to have a schedule of activities for the clients rather than an individual habilitation plan.

(2) The program shall follow its written policies and procedures as approved by the department for the admission of clients. The program shall describe how its program is especially designed to meet the needs of the mentally retarded or developmentally disabled clients it admits and any other client groups served.

(3) The program shall not admit more clients than its licensed capacity; licensed capacity in this section shall mean the maximum number of people in the day program at any one time.

(4) The program shall not admit nor keep any client who is not, or would not, benefit from the services provided by the program as described in the client’s individualized program plan.

(5) The program shall maintain written instruction on how to reach the designated parent or guardian and physician in case of emergency; the instructions shall include their names, telephone numbers and any other information needed to make emergency contact.

(6) If the day program provides field trips, it shall maintain field trip permission forms signed by the client, parent or guardian.


9 CSR 40-9.135 Care, Treatment, Habilitation and Rehabilitation

PURPOSE: This rule prescribes requirements for client care, treatment and habilitation in day programs as required by section 630.710, RSMo.

(1) The head of the program shall assure that the client and the client’s parent or guardian participate in the development of the individual program plan unless documented that these individuals are unable or unwilling to participate.

(2) The program plan shall be person-centered, developed with the active participation of the client and shall address community membership and involvement, client choice and positive relationships with people who are not paid staff.

(3) The person responsible for implementation of individual objectives of the program plan shall collect data on its implementation and shall prepare a monthly summary. The program plan shall be reviewed at least quarterly by a designated member of the interdisciplinary team and updated annually by the interdisciplinary team. The annual update and implementation of the plan shall occur within three hundred sixty-five (365) days after the implementation of the previous plan.

(4) Chemical restraints, mechanical restraints, seclusion or aversive stimuli shall not be used.

(5) Physical restraint shall be used only when less restrictive alternatives have failed and only to reduce or eliminate an episode or substantial risk of serious physical harm. Any use of restraint shall conform to the program policies and procedures regarding restraint. Physical restraint shall be applied only by a staff person who has been trained in its use.

(6) The day program shall use a time-out only as follows:

(A) A client is placed in time-out only under conditions set out in a written behavior modification program incorporated in his/her program plan;

(B) The client’s program plan identifies the precise behavior which may precipitate the time-out and identifies staff persons authorized to implement time-out procedures;

(C) A single time-out period does not exceed fifteen (15) minutes;

(D) The date, time and duration of each time-out period shall be documented in the client’s file; and

(E) The client is not placed alone in a locked room.

(7) Temporary exclusion or removal of a client as a behavior method, but not as a formal behavior modification procedure, shall be governed by written policies regarding control and discipline, as required by 9 CSR 40-2.075(2)(A)3.E.

(8) Mechanical supports shall be prescribed by a licensed physician, designed and applied under the supervision of a registered occupational therapist, registered nurse (RN), physical therapist or physician who shall issue an order indicating how often clients shall be checked for proper body alignment, circulation, position change and other bodily functions which might be affected by use of mechanical supports. These orders shall be reviewed at least quarterly by the physician, occupational therapist, physical therapist or RN. Clients in mechanical supports shall be checked, at a minimum, twice daily, upon application of the supports and upon their removal unless more frequent checks are required by the order.

(9) A notation of all checks of a person in time-out or in mechanical supports shall be entered in the client’s records.

(10) The day program shall not use a protective device unless—

(A) It is necessary to protect the client from serious physical injury;

(B) Less restrictive alternatives have failed;

(C) It is applied by staff trained in the use of protective devices;
(D) It is applied in a way that will not cause physical injury, bodily discomfort or psychological trauma to the client; and

(E) It has been authorized by a prior order from a physician and approved by the head of the program and, except in emergencies, the interdisciplinary team. Physician’s orders for protective devices shall be reviewed every ninety (90) days.

(11) In programs which have incontinent clients, the program shall insure that clients are kept clean and that clean clothing is available at the program. There shall be a system for either washing or storing soiled clothing and returning it to the client’s home.


**CSR 40-9.145 Maintenance, Housekeeping and Laundry**

**Purpose**: This rule prescribes maintenance, housekeeping and laundry requirements in day programs as required by section 630.710, RSMo.

(1) The program shall have an effective plan for maintenance and housekeeping including staff, equipment and supplies available at the program. The day program shall—

(A) Maintain the building in good repair and in a safe, clean and orderly condition;

(B) Maintain walls, ceilings and floors in good repair and free from peeling wallpaper or paint, cracks or holes, loose or cracked tiles or carpeting, loose handrails or railings, loose or broken windows and other similar hazards;

(C) Maintain the interior and exterior finishes of the building in a clean, attractive and safe condition;

(D) Maintain carpeting, draperies, furniture and other furnishings in a clean, attractive and safe condition;

(E) Maintain the electrical system, including electric wires and appliances, in a safe and functioning condition and provide sufficient and satisfactory artificial lighting and power to meet the demands of the day program and needs of the clients; artificial lighting shall be provided with protective shielding;

(F) Maintain plumbing, heating and fire protection systems in a safe and functioning condition;

(G) Maintain the program premises including basements, attics, stairwells and unoccupied rooms to minimize fire hazards;

(H) Maintain the ground and other buildings on the grounds, regardless of whether or not they are intended for client use, in a safe, sanitary and presentable condition;

(I) Prevent odors;

(J) Make adequate provision for the storing, cleaning and sanitizing of equipment and devices used by clients with special needs, to assure that such equipment and devices are protected from contamination; and

(K) Store refuse so as to be inaccessible to vermin and not to create a nuisance.

(2) If a day program provides laundry services for items used by clients, the day program shall—

(A) Provide space for sorting, processing and storage of soiled linens separate from space used for clean linens;

(B) Provide for prewash of linens soiled by incontinent clients; and

(C) Vent dryers properly.


**CSR 40-9.155 Fire Safety**

**Purpose**: This rule prescribes fire safety requirements for all day programs as required by section 630.710, RSMo.

**Editor’s Note**: The secretary of state has determined that the publication of this rule in its entirety would be unduly cumbersome or expensive. The entire text of the material referenced has been filed with the secretary of state. This material may be found at the Office of the Secretary of State or at the head-quarters of the agency and is available to any interested person at a cost established by state law.

(1) The head of the day program shall have adequate fire detection equipment installed in accordance with National Fire Protection Association codes and approved by the state fire marshal’s inspector.

(A) The day program shall provide a home-type detector in each room of the building in which the day program is located, including restrooms without bathing facilities, storage rooms in front of the door to each stairway and at intervals of no more than thirty feet (30’) in corridors. Home-type detectors shall have the approval of an accepted testing laboratory, shall be powered by an individual battery and shall sense smoke or smoke and heat and sound an audible alarm. Detectors shall be tested monthly and batteries shall be changed as needed. A record shall be kept of the dates of testing and changing of batteries.

(B) Day programs with more than fifty (50) clients or with clients using more than one (1) floor shall have a manual fire alarm system to supplement protection offered by the detectors required under subsection (1)(A). The fire alarm system shall transmit an alarm by the most direct and reliable method to the local fire department.

(C) The day program shall have an electrical alarm system including an automatic fire sprinkler system under any of the following conditions:

1. Clients use any floor above the second floor;
2. Clients who require mechanical or human assistance to evacuate the day program use any floor above or below the first floor; or
3. Clients use a floor below the level of exit discharge, such as a cellar or basement, which exceeds twelve hundred (1200) square feet in total area.

(D) Water supply for sprinkler systems required under this section may be a domestic water source if the domestic water system is designed to adequately support the design flow of the largest number of sprinklers in any one area.

(E) The day program shall be located in the same fire section as a high-hazard occupancy, either manufacturing, industrial or storage, as defined by the National Fire Protection Association.

(3) Day programs shall be separated from other occupancies in the same building in accordance with the following fire grading requirements:
Fire Grading of Use Groups

<table>
<thead>
<tr>
<th>Use Group</th>
<th>Fire Grading in Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assembly, theatres</td>
<td>3</td>
</tr>
<tr>
<td>Assembly, night clubs</td>
<td>3</td>
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<tr>
<td>Assembly, recreation centers, lecture halls, terminals, restaurants</td>
<td>2</td>
</tr>
<tr>
<td>Assembly, churches, schools</td>
<td>1 1/2</td>
</tr>
<tr>
<td>Business</td>
<td>2</td>
</tr>
<tr>
<td>Institutional, restrained</td>
<td>3</td>
</tr>
<tr>
<td>Mercantile</td>
<td>3</td>
</tr>
<tr>
<td>Residential, hotels</td>
<td>2</td>
</tr>
<tr>
<td>Residential, multifamily dwellings</td>
<td>1 1/2</td>
</tr>
<tr>
<td>Residential, 1- and 2-family dwellings</td>
<td>1</td>
</tr>
</tbody>
</table>

(4) Approved, portable fire extinguishers shall be located on each floor of the day program so that no person will have to travel more than one hundred feet (100') from any point to reach the nearest extinguisher. Additional approved fire extinguishers, type A-B-C or extinguishing systems, shall be provided for every kitchen, laundry, storage room, boiler room, furnace room, elevator motor room and other mechanical equipment rooms. All personnel employed in the day program shall be instructed in the operation of the fire alarm system and the various types of extinguishers.

(5) Fire alarm systems and sprinkler systems shall be inspected annually by a competent authority who shall test and certify in writing that the system is operating properly. Annual inspections performed for insurance purposes are acceptable.

(6) Hazardous materials, fuels and other combustible supplies and equipment, the contents of which are easily ignited, burn with intense flame or result in the production of dense smoke or fumes (for example, oil base paint, paint thinner, cleaning supplies, charcoal lighter and gasoline) shall be stored in a room, space or container having a fire-resistance rating of at least one (1) hour.

(7) Boilers, furnaces and gas hot water heaters shall be located in a room which is separated from the rest of the day program by construction having a fire-resistance rating of at least one (1) hour or the room shall be protected by an automatic extinguishing system. These rooms shall not be used for storage. Doors to these rooms shall be solid core or equivalent and shall be self-closing. There shall be adequate ventilation to the outside atmosphere to properly support combustion in the boiler, furnace or hot water heater. Furnaces and hot water heaters having an open flame shall not be located in garages unless they are enclosed by a one (1)-hour fire-resistance rating assembly and burners are located at least eighteen inches (18") above the garage floor.

(8) The heating of day program facilities shall be restricted to steam, hot water or warm air systems employing either central heating plants with installation so as to safeguard the inherent fire hazard or approved installations of outside wall heaters which bear the approved label of the American Gas Association or the American Insurance Association. Alternate modern types of heating systems may be accepted, if approved by the department. The use of portable heaters of any kind is prohibited. If approved wall heaters are used, adequate guards shall be provided to safeguard clients. The heating apparatus employed shall not constitute a burn hazard to the clients. Floor-type heaters or furnaces shall not be permitted. All heating equipment shall be equipped with a thermostat control.

(9) Heating and ventilation systems and equipment shall be installed and maintained in compliance with standards of the American Insurance Association or American Gas Association. Liquefied petroleum gas (LPG) tanks shall be inspected annually for leaks. Furnaces and other heating units also shall be inspected annually. In day programs having thirteen (13) or more clients, the hot water heater shall be inspected annually and approved by qualified authorities such as service representatives of a commercial heating company or a public utility company. The head of the day program shall maintain a record of the results of the inspections required of this rule.

(10) Hot water heaters shall have a pressure and temperature relief valve, be properly vented and equipped with thermostatic controls in compliance with the applicable codes. The overflow pipes from the pressure relief valve shall be installed and extend to within three inches (3") of the floor. There shall be an air gap between the bottom of the overflow valve and any floor or sewer drain.

(11) The use of wood, gas or electric fireplaces shall not be permitted unless they are installed in compliance with National Fire Protection Association codes and the day program has prior approval of the department. Free standing fireplaces, wood stoves and other fuel burning appliances shall meet the requirements set forth in Appendix A of this rule.

(12) Heating elements such as wood stoves, fireplaces, space heaters, radiators and wall furnaces in spaces occupied by clients shall be protected by partitions, screens or other means approved by the department to safeguard clients from burns.

(13) Exits shall meet the following requirements:

(A) Each floor used by clients shall have at least two (2) exits remote from each other. At least one (1) of these exits must lead directly outside at ground level, to an outside stairway or to an enclosed stairway that is separated by one and one-half (1 1/2)-hour fire-resistant rating construction from each floor and has an exit leading directly to the outside. Neither of the required exits shall lead through a restroom, a furnace room or a boiler room. A required exit shall not be through a kitchen if the day program serves more than ten (10) clients:

(B) Every room or space with a capacity of over twenty-five (25) clients or over one thousand (1000) square feet (92.9 square meters) in area shall have at least two (2) doorways as remote from each other as practicable. These doorways shall provide access to separate exits, but, where egress is through corridors, may open upon a common corridor leading to separate exits in opposite directions;

(C) If part of the building in which the day program is located is vacant or if the day program shares the use of the building with any other occupancy not subject to these rules, both required exits shall lead directly outside or to an enclosed corridor or stairway that leads directly outside and is not available to any other occupancy as a means of egress;

(D) Outside stairways shall be substantially constructed to support clients during evacuation. They shall be kept clear of ice and snow. Newly constructed fire escapes shall be at least thirty-six inches (36") wide, shall have eight-inch (8") maximum risers, nine-inch (9") minimum tread, no winders, maximum height between landings of twelve feet (12'), minimum dimensions of landings of forty-four inches (44"), landings at each exit door, handrails on both sides and be of sturdy construction using at least two-inch (2") lumber and shall be continuous to ground level;

(E) Outside stairways in day programs with three (3) floors shall be constructed of iron or steel;

(F) Travel distance between any room door and an exterior exit, shall not exceed one
hundred feet (100'), nor shall any point in a room and an exterior exit exceed one hundred fifty feet (150'). These travel distances may be increased by fifty feet (50') in buildings completely equipped with an automatic fire extinguishing system;

(G) The day program shall keep all means of egress, including exits, corridors, passageways, aisles, walks, ramps, porches and exit-through rooms free of any item that would obstruct the exit route;

(H) Exits shall be arranged so there are no pockets or dead-ends which extend more than twenty feet (20') beyond the stairway or other means of exit;

(I) Corridors, aisles or passageways to be used as a means of horizontal exit shall be at least thirty-four inches (34") wide;

(J) Exit doors shall be at least thirty-six inches (36") wide in new construction and twenty-eight inches (28") in existing buildings. All exit doors shall swing in the direction of exit travel if the day program serves ten (10) or more clients. They shall be provided with panic hardware if the exit is subject to use by fifty (50) or more persons. Locks shall not require the use of a key from the inside of the building;

(K) In multi-use occupancies, clients shall not have inside access to other areas of the building;

(L) Latches on closet doors shall be such that they can be opened from the inside by clients; and

(M) Locks on bathroom doors shall be designed to permit opening from the outside and the device to open the door shall be readily accessible to staff.

(14) The day program shall have Underwriters’ Laboratory (UL)-approved emergency lighting for means of egress. The emergency lighting system shall use only reliable types of rechargeable batteries provided with suitable facilities for maintaining them in properly charged condition. The emergency lighting system shall operate without manual intervention on failure of normal services. Emergency lighting for means of egress is not required if the state fire marshal determines the means of egress to be safely lighted by some other source.

(15) Day programs serving more than ten (10) clients shall provide at each exit a sign bearing the word EXIT.

(A) The exit sign shall be readily visible from the direction of exit access and shall provide contrast with decorations, interior finish and other signs.

(B) Letters of signs shall be as least six inches (6") high, with the principal strokes of the letters not less than three-fourths inch (3/4") wide.

(C) Exit signs shall be powered by the building’s electrical service with battery backup having a duration time of at least one and one-half (1 1/2) hours. Approved self-luminous nonelectrical exit signs may be used in lieu of exit signs powered by the building’s electrical system.

(16) The day program shall have a firestop partition between each floor.

(A) All doors providing separation between floors shall have a self-closing device attached. If the doors are to be held open, they shall use electromagnetic hold-open devices that are interconnected with other fire extinguishers or alarm systems in the building.

(B) Firestop partitions shall have a one (1)-hour fire-resistance rating when serving three (3) stories or less and a two (2)-hour fire-resistance rating when serving four (4) or more stories.

(C) Smokestop partitions shall extend from wall-to-wall and floor-to-ceiling or roof.

(D) Openings in firestop partitions shall be protected by approved doors with a fire-resistant rating of at least three-fourths (3/4) of an hour, be self-closing and kept closed at all times, unless they have magnetic hold-open devices connected to the fire detection or sprinkler system.

(E) Doors shall swing in the direction of exit travel.

(17) If kitchens in day program facilities have a commercial stove or deep fryer, the day program shall—

(A) Provide each cooking range and deep fryer with a range hood and fire suppression system with automatic cutoff for fuel supply and exhaust system in case of fire. The fire suppression system shall be installed and cleaned in accordance with National Fire Protection Association codes;

(B) Have interior kitchen doors separating the kitchen from the rest of the facility. These doors shall have a fire-resistant rating of three-fourths (3/4) of an hour or equivalent and shall be kept closed when not in use.

(18) Every room or space used by clients, except restrooms, shall have at least one (1) outside window for emergency rescue and ventilation. The window shall be operable from the inside without the use of tools and provide a clear opening of not less than twenty inches (20") in width, twenty-four inches (24") in height and five and seven-tenths (5.7) square feet in area. The bottom of the opening shall not be more than forty-four inches (44") above the finished floor and any latching device shall be capable of being operated from not more than fifty-four inches (54") above the finished floor. This window requirement does not apply under the following circumstances:

(A) In buildings protected throughout by an approved automatic sprinkler system;

(B) In buildings protected throughout by an approved smoke detection system, with detectors spaced at a maximum of thirty feet (30’) on center and with direct tie to the fire department servicing the area; or

(C) Where the room or space has a door leading directly to the outside of the building.

(19) Stairways shall be adequately illuminated with electric lights and shall be provided with well secured handrails which may project not more than three and one-half inches (3 1/2") on each side. The minimum width of stairway shall be at least thirty inches (30’). The width of a landing at either end of a flight of stairs shall not be less than the width of any door leading to the stairs.

(20) There shall be no enclosed usable space under the stairs in any exit enclosure, nor shall the open space, either under the stair or adjacent to the stairs, be used for storage.

(21) All preliminary plans and drawings for sprinkler systems and fire alarm systems shall be reviewed by the state fire marshal before they are installed.

(22) The state fire marshal reserves the right to require any reasonable, additional fire protection measures deemed necessary for the safety of its clients.

(23) The state fire marshal, at his/her discretion, may approve the use of systems, methods or devices which provide a level of protection which is equivalent or superior to the protection provided under this rule.

(24) The head of the day program shall conduct fire drills at least monthly and shall cooperate with the state fire marshal’s inspector in initiating unscheduled fire drills. The head of the day program shall keep a written report of each drill indicating whether the evacuation plan was realized, whether any problems were encountered and whether any corrections are needed.


Appendix A

Rules for the Installation and Use of Fireplaces, Wood Stoves and Other Fuel Burning Appliances

I. The stove must be approved by a nationally recognized testing and approving agency.

II. Wood stoves, free-standing fireplaces and other fuel burning appliances must be at least thirty-six inches (36") away from walls and other combustible materials. (This includes furniture, drapes and firewood.) The connector (chimney or flue) must have at least eighteen inches (18") clearance from the walls and ceiling.

III. A connector to a masonry chimney must be the size recommended by the manufacturer for the stove and chimney height. If the stove or fireplace connection is to a masonry chimney, there must be at least eight inches (8") clearance to combustible material at the surface where the connector enters the chimney. Combustible material includes paint, wallpaper, paneling and gypsum board. The connection to the chimney must be through a metal or fireclay thimble. The thimble must be flush with the inside of the flue liner and flush with the outer surface of the masonry chimney. It must be cemented in place with high temperature cement.

IV. There must be a noncombustible hearth under the stove or fireplace. The hearth must extend at least eight inches (8") on the sides and back of the fireplace or stove and at least eighteen inches (18") in the front.

A. If there is no clearance at the bottom of the stove or fireplace, it must rest on brick or hollow blocks at least eight inches (8") thick. There must be a piece of sheet metal at least twenty-four (24") gage between the bricks or blocks and the floor. The spaces between the bricks or blocks must be filled with sand.

B. If the stove has legs, the floor fire protection, at a minimum, must meet the following requirements:

1. If the legs are eighteen inches (18") high, the floor shall be protected by one-quarter inch (1/4") noncombustible millboard, with twenty-four inch (24") gage sheet metal between the millboard and the floor;
2. If the legs are eight inches (8") high, the floor shall be protected by three-eighths inch (3/8") noncombustible millboard with twenty-four (24") gage sheet metal between the millboard and the floor;
3. If the legs are four inches (4") high, the floor shall be protected by four inch (4") brick or hollow blocks with twenty-four (24") gage sheet metal between the blocks and the floor. The spaces between the bricks/blocks must be filled with sand; and
4. When noncombustible millboard is used, the top surface of the millboard must be protected from damage by the stove legs. Pieces of ceramic tile or sheet metal placed between the stove legs and the millboard will do this. Note: Noncombustible millboard not compressed asbestos board must be used.

V. When fireplaces, woodstoves or other fuel burning appliances are in use, the head of the day program shall require that a window be opened or use other ventilation methods to replace the air used for combustion.

VI. Factory-built metal chimneys shall be UL-approved and meet the following requirements:

A. They must be double or triple wall construction;
B. Double wall chimneys must be installed with at least a two-inch (2") clearance to combustible material;
C. The inside diameter and height must be as specified by the manufacturer in his/her installation instructions;
D. Where double wall metal chimneys penetrate floors and ceilings, factory-built firestop spacers must be used to maintain clearances;
E. Portions of the double wall metal chimney extending through rooms or closets must be enclosed to prevent contact with persons or combustible material. Chimney chases must be firestopped;
F. The chimney must terminate at least two feet (2') higher than any part of a building within ten feet (10'). It must be at least three feet (3') higher than the highest part of the roof it passes through;
G. All chimney parts must be factory-built and must be UL-listed. This includes items such as: chimney cap, roof flashing, chimney support boxes, firestop spacers, storm collars, cleanouts, elbows, braces, bands and wall spacers;
H. All openings through which the chimney passes must be firestopped with noncombustible material;
I. An exterior metal chimney may not be closer than twenty-four inches (24") to a door, window or walkway unless it is insulated or shielded to prevent burning a person who might touch it;
J. There must be three feet (3')-clearance between the chimney and the property line;
K. A cleanout “T” must be installed;
L. When a woodburning appliance is connected to a flue, no other appliances can be connected to the same flue. All other openings, except for the cleanout, must be permanently sealed; and
M. A spark arrester must be installed at the chimney outlet.

Secretary of State